U.S. Department of Justice Executive Office for Immigration Review Immigration Court

OMB#1125-0006

Notice of Entry of Appearance as Attorney or Representative Before the Immigration Court

(Type or Print) NAME AND ADD	RESS OF REPRESENTED	PARTY		ALIEN ("A") NUMBER (Provide A-number of the party represented in this case.)	
(First)	(Middle Initial)	(Li	ast)		
(N	umber and Street)	(A	pt. No.)		
(Ci	ity)	(State) (Z	ip Code)		
Attorney or Repre	sentative (please check one	of the following):		<u> </u>	
states(s), possess necessary) and I	eligible to practice law in, and sion(s), territory(ies), common am not subject to any order dien any jurisdiction (if subject to	wealth(s), or the District sbarring, suspending, en	et of Columbia (use addition njoining, restraining or other	nal space on reverse side if erwise restricting me in the	
Full Name of Court Bar Number (if applicable)					
	ative accredited to appear before the following recognized org		for Immigration Review as	defined in 8 C.F.R. §	
I am a reputable I am an accredit	int or law graduate of an accreding individual as defined in 8 C.F. and foreign government official, tho was authorized to practice of the state of	R. § 1292.1(a)(3). as defined in 8 C.F.R.	§ 1291.1(a)(5), from	(country).	
Attorney or Repre	sentative (please check one	of the following):			
=	y appearance as attorney or rep				
EOIR has ordered the provision of a Qualified Representative for the party named above and I appear in that capacity.					
governing appearance		the Board of Immigrat	ion Appeals. I declare und	the regulations and conditions er penalty of perjury under the	
SIGNATURE O	F ATTORNEY OR REPRES	ENTATIVE	EOIR ID NUMBER	DATE	
X					
NAME OF ATTO	RNEY OR REPRESENTAT	TIVE, ADDRESS, FA	X & PHONE NUMBER	RS, & EMAIL ADDRESS	
Name:	(Ti)				
	(First)	(Middle Ini	tial)	(Last)	
Address:		(Number an	nd Street)		
	(City)	(St	rate)	(Zip Code)	
Telephone:	Facsimile:	Email:			
				re if new address	

Indicate Type of Appearance:				
Primary Attorney/Representative Non-P	rimary Attorney/Representative			
On behalf of	_ (Attorney's Name) for the following hearing: (Date)			
I am providing pro bono representation. Check one:	yes no			
Proof of Service				

Proof of Service				
I (Name)	mailed or delivered a copy of this Form EOIR-28 on (Date)			
to the DHS (U.S. Immigration and Customs Enforcement – ICE) at				
$\mathbf{X}_{}$				
	Signature of Person Serving			

APPEARANCES - An appearance shall be filed on a Form EOIR-28 by the attorney or representative appearing in each case before an Immigration Judge (see 8 C.F.R. § 1003.17). When an appearance is made by a person acting in a representative capacity, his/her personal appearance or signature constitutes a representation that, under the provisions of 8 C.F.R. part 1003, he/she is authorized and qualified to represent individuals and will comply with the EOIR Rules of Professional Conduct in 8 C.F.R. § 1003.102. Thereafter, substitution or withdrawal may be permitted upon the approval of the Immigration Judge of a request by the attorney or representative of record in accordance with 8 C.F.R. § 1003.17(b). Please note that appearances for limited purposes are not permitted. *See Matter of Velasquez*, 19 I&N Dec. 377, 384 (BIA 1986). A separate appearance form (Form EOIR-27) must be filed with an appeal to the Board of Immigration Appeals (see 8 C.F.R. § 1003.38(g)). Attorneys and Accredited Representatives (with full accreditation) must first update their address in eRegistry before filing a Form EOIR-28 that reflects a new address.

FREEDOM OF INFORMATION ACT - This form may not be used to request records under the Freedom of Information Act or the Privacy Act. The manner of requesting such records is in 28 C.F.R. §§ 16.1-16.11 and appendices. For further information about requesting records from EOIR under the Freedom of Information Act, see How to File a Freedom of Information Act (FOIA) Request With the Executive Office for Immigration Review, available on EOIR's website at http://www.justice.gov/eoir.

PRIVACY ACT NOTICE - The information requested on this form is authorized by 8 U.S.C. §§ 1229(a), 1362 and 8 C.F.R. § 1003.17 in order to enter an appearance to represent a party before the Immigration Court. The information you provide is mandatory and required to enter an appearance. Failure to provide the requested information will result in an inability to represent a party or receive notice of actions in a proceeding. EOIR may share this information with others in accordance with approved routine uses described in EOIR's system of records notice, EOIR-001, Records and Management Information System, 69 Fed. Reg. 26,179 (May 11, 2004), or its successors and EOIR-003, Practitioner Complaint-Disciplinary Files, 64 Fed. Reg. 49237 (September 1999).

CASES BEFORE EOIR - Automated information about cases before EOIR is available by calling (800) 898-7180 or (240) 314-1500.

FURTHER INFORMATION - For further information, please see the *Immigration Court Practice Manual*, which is available on the EOIR website at <u>www.justice.gov/eoir</u>.

ADDITIONAL INFORMATION:

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. The estimated average time to complete this form is six (6) minutes. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Executive Office for Immigration Review, Office of the General Counsel, 5107 Leesburg Pike, Suite 2600, Falls Church, Virginia 20530.